FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D.C. 20549 | OMB APPROVAL | | | |
|--|--------------|--------|--|--|
| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number: | 3235-0 | | |

| | OMB Number: | 3235-0287 | | | | | | | | |
|--------------------------|---------------------|-----------|--|--|--|--|--|--|--|--|
| Estimated average burden | | | | | | | | | | |
| | hours ner resnonse: | 0 1 | | | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* JOHNSON JULIA L | | | | | 2. Issuer Name and Ticker or Trading Symbol MASTEC INC [MTZ] | | | | | | | | 5. Relationship of Reporting Person(s) to Iss (Check all applicable) X Director 10% Ow | | | | | | |
|--|--|--|---------------------------------|---|--|--|---|--|------------------|---------------------------------------|--------------------|---|--|---|---|--|--|--|---------|
| (Last) (First) (Middle) PO BOX 14737 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/15/2022 | | | | | | | | | | Office below | er (give title v) | | Other (below) | specify |
| (Street) TALLAHASSEE FL 32317 (City) (State) (Zip) | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indi Line) X | ′ | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | tion 2A. Deemed Execution Date, | | | 3. 4. Securities Acq Transaction Disposed Of (D) (Code (Instr. 5) | | uired (A |) or | 5. Amount of | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or Pi | ice | Transa | action(s) 3 and 4) | | | , |
| Common Stock 02/15 | | | | 02/15/2 | 2022 | | A | | 364 | A | \$ | 0.00 | 67 | 67,140 | | D | | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any | | | 4. Transaction Code (Instr. 8) | | of Deriv Secu Acqu (A) o Dispo | vative irities ired r osed) | Expiration D (Month/Day/ities red sed 3, 4 | | te Amo Secu Und Deri Secu | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4) | Ownersh Form: Direct (D) or Indirect (I) (Instr. | | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amou or Numb of Share | er | | | | | |

Explanation of Responses:

Remarks:

\s\ Albert de Cardenas For: Julia Johnson

02/17/2022

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.